PTO/SB/07 (08-03)

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Application Number MULTIPLE DEPENDENT CLAIM 10/283,587 Filing Date FEE CALCULATION SHEET Substitute for Form PTO-1360 (For use with Form PTO/SB/06) May be used for additional claims or amendments CLAIMS AS FILED AFTER FIRST AFTER SECOND AMENDMENT **AMENDMENT** Indep Depend Indep Depend Indep Depend Indep Depend Indep Depend Depend .31 81 -Total Indep Total Indep Total Depend Total Depend Total Claims Total Claims

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